

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	V/NW		07-18-01
O.I.P.E. CLASSIFIER		4/3	7/5/01
FORMALITY REVIEW	AM	917	08-24-01
RESPONSE FORMALITY REVIEW	AM	825	11/1/02

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	0	✓	
8	0	✓	
9	✓	✓	
10	✓	✓	
11	✓	✓	
12	✓	✓	
13	0	✓	
14	✓	✓	
15	✓	✓	
16	N	✓	
17	N	✓	
18	✓	✓	
19	✓	✓	
20	✓	✓	
21	✓	✓	
22	✓	✓	
23	✓	✓	
24	✓	✓	
25	0	✓	
26	✓	✓	
27	0	✓	
28	0	✓	
29	✓	✓	
30	0	✓	
31	0	✓	
32	0	✓	
33	0	✓	
34	✓	✓	
35	✓	✓	
36	N	✓	
37	N	✓	
38	N	✓	
39	N	✓	
40	N	✓	
41	N	✓	
42	N	✓	
43	N	✓	
44	N	✓	
45	N	✓	
46	+	✓	
47	✓	✓	
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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822
 8/25
 947
 01/11/02